

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077755

FILED
Mar 19, 2006
Secretary of State

Entity Name: OLGA M. GARCIA M.D. P.A.

Current Principal Place of Business:

11249 SW 132ND PLACE #2
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11249 SW 132ND PLACE #2
MIAMI, FL 33186

New Mailing Address:

FEI Number: 56-2378506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, OLGA M
7235 CORAL WAY, STE 201
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

GARCIA, OLGA M
7235 CORAL WAY, STE 202
MIAMI, FL 33155 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: OLGA M. GARCIA MD

03/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: GARCIA, OLGA M
Address: 11249 SW 132ND PLACE #2
City-St-Zip: MIAMI, FL 33186

Title: V () Delete
Name: RODRIGUEZ, MARIA E
Address: 11249 SW 132ND PLACE #2
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLGA M GARCIA MD

PRES

03/19/2006

Electronic Signature of Signing Officer or Director

Date